Date: June 22,2	Time:	14:30		Inspector: _	Adam Lones	, CRA	
Address: 190	) Dryden Roc	nd .		Site Layout:	Parcel Number: _	5054	Building: 5
Building Owner: 🔌	in Jurgenser	I		3	TATE TESTING		
Occupant Name: 🗸	uley Asiphalt	Plan	t No.6		ALL MANAGEMENT OF THE PARTY OF	او (حجب	30
Contact Name: D	an Crajo, Bil	ll Hor	st	Torofrhouse			
Phone Number:	737-4779-95	68		THE RESERVE			
Time resident/emplo	yed in home/build	ding? •	· 1950s				SERVICE CENTER
Occupation: Hot m	ix asphalt pl	ant					2061 D 1041
Number and Age of (	Occupants Adults Childr		4 but varies	SOUTH DAY		Pow	DAYTON DAYTON PER & LIGHT
BUILDING TYPE: C (Circle One) Residential, what ty If residential, what ty If multiple units, how If commercial, what i Does the commercial If yes, how many? N DESCRIBE BUILDING Is the building insula Previous Uses:	tial / Industrial / ( pe (circle): Single for many?N/A s the business? Aso property include r /A NG: single store ted? Y/N don't h	Common amily balt Presiden	ercial / Mul / Condo / I lant State ces (i.e., mu ladding ladding How a	ti-use / Other Multi-family / testingles Hould House)? Y / I	r (specify)  Other (specify)  urs of Occupation  YEAR CO  t /Average/ No	n/Occupa n current se aerial ph sent of NSTRUC ot Tight	
WEATHER SEALS:	General Condition	: Goo	d Fa:	ir Poc	or Not Pr	esent	
Are doors/windows	kept open to allow	for ou	tdoor-to-in	door air excha	inge? not typ	oically, 6	uindous inoperable
BASEMENT/: BOTTOM FLOOR	None	<b>⊠</b> Fi	nished U	nfinished	Depth below repoint (meters)	ference	Floor covering
	Partial						
	Full						
•	Crawl space		N/A	N/A		<del></del>	
	Slab-on-grade				N/A		coated/painted
Is the basement/bottom floor used as a living/work space area? (circle)  \( \frac{\mathbb{N}}{N} \)  \( \sigma \)							
Number of floors at or above grade:							
Depth of basement be	elow grade: <u>\u2214/</u> A	_ ft.	Basement S	ize: <u>- 594</u> ft	2		

Foundation construction: Poured concrete 🗹 Concrete block 🗆 Cinder block 🗅 Stone 🗖							
Foundation walls: Poured   Block   Stone   Other   Steel cladding							
Foundation walls: Unsealed Sealed Sealed with painted							
Integrity of <del>foundation</del> walls: Good ☑ Fair □ Poor □							
The $\frac{basement}{bottom}$ floor is: Wet $\square$ Damp $\square$ Dry $\square$ Moldy $\square$							
Any visual evidence of leakage through basement/bottom floor walls or floor Yes \(\sigma\) No \(\sigma\)							
Floor Construction: Poured concrete  Wood  Earth  Brick  Other:							
Floor condition (cracks, drains): some snocks visible							
Condition at floor/wall joint (if visible): okay, thin cracks							
Any exterior openings from the basement/bottom floor:							
☑ Vents ☑ Fans ☑ Windows							
☐ Wall openings ☐ Utility pipe penetrations ☐ Other: man door × 2  Type of ground cover outside of building: grass / concrete / asphalt / other (specify): arave/							
Sub-slab vapor/moisture barrier in place? Yes / No/ Don't know Type of barrier:							
RADON SYSTEM:   Yes No Is the system active or passive? Active / Passive							
Do you have a sump?: Yes \(\sigma\) Where: \(\sigma\)/\(\lambda\) (show on figure)							
If yes, sealed □ open ■ NA ■ ✓ If yes, is there water in the sump?: Yes □ No □ N/A							
Have there ever been a fire in the building?: Yes \( \subsetence \) No \( \subsetence \) no evidence of one							
If yes, describe its location and extent: NA							
Is there a laundry room located inside the house/building?: Yes No 🗷							
If yes, describe its location: NA							
WATER AND SEWAGE							
Is this building serviced with municipal water? Yes ☐ No ☒							
Water well present?: Yes ☒ No ☐ Don't know ☐ Is well used for drinking water? Yes ☐ No ☒							
Well location: VAW1 - VAW2, see figure (show on figure) What do you use the well for?: washrooms, truck wood							
Do you have a cistern?: Yes □ No ☑ Don't know □							
If yes, describe its location:							
Do you have a septic system?: Yes 🗖 No 🗷							
If yes, describe its location:(show on figure)							
If yes, describe how septic system is cleaned: N/A							
GARAGE: Is there an attached garage? ☐ Yes ☑ No Describe: ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ► ►							

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038443

CONESTOGA-ROVERS & ASSOCIATES

HEATING, VENTILLATION	ON, AND	AIR CONDITIONIN	I <b>G</b>								
Type of heating system(s) u	/	e all that apply, note p	rimary)								
Hot air circulation		Heat pump		Hot water baseboard							
Space heaters		Stream radiation		Radiant floor							
Electric baseboard 🔻 🗹		Wood stove		Outdoor wood boiler							
FURNACE: Location:	N .										
Type: Gas	M V	Forced air		Wood							
Oil		Hot water		Propane							
Electric	4	Coal		Other:	· ·						
Does furnace have outside combustion air vent?  Do you have a fireplace? Yes □ No □ Does fireplace have an outside combustion air vent? Yes □ No □  Do you use kerosene space heaters? Yes □ No □											
(If yes, which rooms and capacities?) control coops only lab + office											
SPILL/CONTAMINANT SOURCE INFORMATION Visual evidence of spills/releases:											
Type of petroleum/VOC release? N/A  When did the release occur? N/A											
Are there any odors?   Ye	s 🛮 No	If ves, describe the od	ors: N/	4							
Where are the release-relate											
Photo Direction			Subject								
				·							
				<u>,</u>							
. *											
*											

### **Building Layout:**

Parcel Number\_\_\_5054\_\_\_; Building \_\_1\_\_

Mark the following on the below Figure: Additions or Modifications; door/windows/loading docks kept open for air exchange; building compartmentalization, including size and locations of compartments

